Customer No. 20350 TOWNSEND and TOWNSEND and C. Two Embarcadero Center, 8th Floor San Francisco, California 94111-3834

Attorney Docket No. _

415) 5	76-0200			<u>ت</u>						5 = 6
ASSISTANT COMMISSIONER FOR PATENTS BOX PATENT APPLICATION			3	"Express Date of D			EL11555101 November <i>1</i>		4390 4390	
Washii	Vashington, D.C. 20231				I hereby certify that this is being deposited with the Upper Postal Service "Express Mail Post Office to Addressed servender 37 CFR 1.10 on the date indicated above, addressed to:					
					Assistant Commissioner for Patents Washington, D.C. 20231					
					Ву:		Sumbuy			
Sir:			i.							
Γransπ	nitted herewith for	filing is the			The PR	did so	£ zec	eive the	follo	wing
	[X] divisional p	patent applica	tion of		В	item(s)			<u>mg</u>	
nvento	or(s)/Applicant Ide	ntifier: ROBI	ERT J. PROEBS	TING					7	
For: Hl	GH SPEED VIDE	EO FRAME B	UFFER							
X]	This application claims priority from each of the following Application Nos./filing dates: 60/023,955/Aug 09, 1996; 08/884,845/Jun 30, 1997; and 09/179,260/Oct 26, 1998. the disclosure(s) of which is (are) incorporated by reference.									
X]	Please amend this application by adding the following before the first sentence: "This application is a [x] Division of and claims the benefit of U.S. Application No. 09/179,260, filed October 26, 1998, which is a Division of U.S. Application No. 08/884,845, filed June 30, 1997, which is a Continuation of Provisional Application No.60/023,955, filed August 9, 1996, the disclosures of which are incorporated by reference." Please enter the enclosed preliminary amendment.									
	ed are:				,					
¥Χ] ↓Χ] ↓Χ]	3 sheet(s) of [X] formal [] informal drawing(s). Information Disclosure Statement under 37 CFR 1.97. A copy of the declaration, specification and claims from the parent application.									
The state of the s	in the second se	(Col. 1) (Col.				ENTITY		OTHER THAN SMALL ENTITY		
	FOR:	NO. FILED	NO. EXTRA	A	RATE	FEE	OR	RATE	FEE	
	BASIC FEE					\$380.00	OR		\$760.00	
	TOTAL CLAIMS	6 - 20	= *0	,	x \$9.00 =		OR	x \$18.00 =	\$0.00	_
	INDEP. CLAIMS	2 - 3	= *0		x \$39.00 =		OR	x \$78.00 =	\$0.00	
	[] MULTIPLE DE	PENDENT CLA	IM PRESENTED		+ \$130.00 =		OR	+ \$260.00 =		
					TOTAL		OR	TOTAL	\$760.00	
	Please charge Deposit Account No. 20-1430 as follows: [X] Filing fee \$\\$\\$760.00\$ [X] Any additional fees associated with this paper or during the pendency of this application.									
	[] A check for \$ is enclosed. Respectfully submitted,									
	2 extra copies of this sheet are enclosed. TOWNSEND and TOWNSEND and CREW LLP									P
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Facsimile: Babak S. Sani (415) 576-0300

Reg No.: 37,495 Attorneys for Applicant

Telephone: (415) 576-0200